

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Friends of Democracy		FEC IDENTIFICATION NUMBER ▼ C C00520080	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	
Full Name (Last, First, Middle Initial) of Payee Mission Control, Inc.		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 114 Mansfield Hollow Rd # A		Amount 84396.36	
City Mansfield Center	State CT	Zip Code 06250-1316	Transaction ID : VN7BA57K39
Purpose of Expenditure mail	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 26 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID RIVERA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 84396.36		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Full Name (Last, First, Middle Initial) of Payee Mission Control, Inc.		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 114 Mansfield Hollow Rd # A		Amount 107259.44	
City Mansfield Center	State CT	Zip Code 06250-1316	Transaction ID : VN7BA57K47
Purpose of Expenditure mail	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 287310.24		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		191655.80	
(b) SUBTOTAL of Unitemized Independent Expenditures▶			
(c) TOTAL Independent Expenditures.....▶			
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;"> <i>Ilyse Hogue</i> Signature [Electronically Filed] Date MM / DD / YYYY 10 / 16 / 2012 </p>			

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Full Name (Last, First, Middle Initial) of Payee Mission Control, Inc.		Date M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 114 Mansfield Hollow Rd # A		Amount 88008.68	
City Mansfield Center	State CT	Zip Code 06250-1316	Transaction ID : VN7BA57K55
Purpose of Expenditure mail	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 19 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: NAN HAYWORTH		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 117358.68		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Mission Control, Inc.		Date M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 114 Mansfield Hollow Rd # A		Amount 121422.88	
City Mansfield Center	State CT	Zip Code 06250-1316	Transaction ID : VN7BA57K63
Purpose of Expenditure mail	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 16 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JAMES B RENACCI		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 149882.88		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	209431.56
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	401087.36

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ilyse Hogue
 Signature [Electronically Filed] Date

M M M / D D D / Y Y Y Y Y Y
10 / 16 / 2012